PAGE 1 / 9

Image# 201701319042234637

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X	For Other Than	An Authorized	Committee	Of	ffice Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT	Exa	mple: If typing, type the lines.	12FE4M5	
Right to Rise USA					
ADDRESS (number and street) ▼	c/o Clark Hill PLC	<u> </u>			
Check if different than previously reported. (ACC)	Washington			DC	20004
2. FEC IDENTIFICATION N	UMBER ▼	CITY A		STATE ▲	ZIP CODE ▲
C C00571372		3. IS THIS REPORT	x NEW (N) O	R AMEN	DED
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15	(b) Monthly Report Due On:	Feb 20 (M2) Mar 20 (M3) Apr 20 (M4)	May 20 (l Jun 20 (N	M6) Sep 20	(M9) Dec 20 (M12) (Non-Election Year Only) (Non-Election Year Only)
Quarterly Report (July 15 Quarterly Report (October 15 Quarterly Report (Q2) (c) 12-Day PRE-E Report	lection	Primary (12P) Convention (12C)	General (120	
January 31 Year-End Report (YE)	Election on	M = M / D = D	/	in the State of
July 31 Mid-Year Report (Non-electi Year Only) (MY)	POST- Report		General (30G)	Runoff (30R)	Special (30S)
Termination Repor (TER)	t	Election on	M = M / D = D	/ Y = Y = Y	in the State of
5. Covering Period 1		2016	through 12		2016
I certify that I have examined t Type or Print Name of Treasure	Spies, Charles, F		vledge and belief it is	s true, correct and co	omplete.
Signature of Treasurer	es, Charles, R., ,		[Electronically Filed]	Date 01	31 / 2017
NOTE: Submission of false, error	neous, or incomplete	information may su	bject the person signi	ng this Report to the p	penalties of 52 U.S.C. § 30109
Office Use					FEC FORM 3X Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 05/2016) Page 2 Write or Type Committee Name Right to Rise USA 11 29 2016 12 31 2016 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 58578054.21 January 1, 2016 (b) Cash on Hand at 3365051.78 Beginning of Reporting Period..... 8875.12 3388188.58 Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 61966242.79 3373926.90 6(a) and 6(c) for Column B)..... 7063.48 58599379.37 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 3366863.42 3366863.42 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Right to Rise USA

Report Covering the Period: From:	29 2016 To			
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
Contributions (other than loans) From: (a) Individuals (Paragan Other)				
(a) Individuals/Persons Other Than Political Committees				
(i) Itemized (use Schedule A)	0.00	455513.26		
(ii) Unitemized(iii) TOTAL (add	0.00	9638.01		
Lines 11(a)(i) and (ii)	0.00	465151.27		
(b) Political Party Committees(c) Other Political Committees	0.00	0.00		
(such as PACs)(d) Total Contributions (add Lines	0.00	0.00		
11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0.00	465151.27		
2. Transfers From Affiliated/Other				
Party Committees	0.00	0.00		
3. All Loans Received	0.00	0.00		
4. Loan Repayments Received 5. Offsets To Operating Expenditures	0.00	0.00		
(Refunds, Rebates, etc.)	0.00	2897753.34		
(Carry Totals to Line 37, page 5) 6. Refunds of Contributions Made to Federal Candidates and Other	0.00	2097/33.34		
Political Committees	0.00	0.00		
7. Other Federal Receipts				
(Dividends, Interest, etc.)	8875.12	25283.97		
(from Schedule H3)	0.00	0.00		
(b) Levin Funds (from Schedule H5)	0.00	0.00		
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00		
 (c) Total Transfers (add 18(a) and 18(b)) 9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts (subtract Line 18(c) from Line 19) 				

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from School III)		Jaionaa Tour to Dute
Activity (from Schedule H4) (i) Federal Share	0.00	0.00
,	1 1 1 1 1 1 1 1 1 1	
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	7063.48	5154242.05
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	7063.48	5154242.05
Transfers to Affiliated/Other Party	7 7000.10	
Committees	0.00	0.00
Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00
Independent Expenditures	4 4	
(use Schedule E) Coordinated Party Expenditures (52 U.S.C. § 30116(d))	0.00	39605692.40
(use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans MadeRefunds of Contributions To:	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	13757674.57
(b) Political Party Committees	000	0.00
(c) Other Political Committees	0.00	0.00
(such as PACs)	0.00	30270.35
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))▶	0.00	13787944.92
Other Disbursements (Including		
Non-Federal Donations)	0.00	51500.00
Federal Election Activity (52 U.S.C. § 30101(2 (a) Allocated Federal Election Activity (from Schedule H6)	20))	
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	222	0.00
(c) Total Federal Election Activity (add	0.00	0.00
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	7063.48	58599379.37
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	7063.48	E0E00070 07
,	7003.40	58599379.37

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

ursements
Page 5

FEC FORM 3X (Rev. 05/2016)		Page 3
III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	465151.27
34. Total Contribution Refunds (from Line 28(d))	0.00	13787944.92
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	-13322793.65
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	7063.48	5154242.05
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	2897753.34
38. Net Operating Expenditures (subtract Line 37 from Line 36)	7063.48	2256488.71

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 6 OF 9 (check only one)				
ITEMIZED RECEIPTS			for each category of the Detailed Summary Page	11a 11b 11c 12 13 14 15 16 X 17			
	ly information copied from such Reports and St. for commercial purposes, other than using the						
	NAME OF COMMITTEE (In Full) Right to Rise USA						
Α.	Full Name of Individual (Last, First, Middle Initi PINNACLE LIST COMPANY	al) or Full C	rganization Name	Date of Receipt			
	Mailing Address 2800 S. SHIRLINGTON ROAD SUITE 401			12 19 2016			
	City ARLINGTON	State VA	Zip Code 22206	Transaction ID : SA17.6073			
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 6471.90			
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item LIST RENTAL INCOME			
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General Other (specify) ▼		19655.08				
В.	Full Name of Individual (Last, First, Middle Initi PINNACLE LIST COMPANY		rganization Name	Date of Receipt			
	Mailing Address 2800 S. SHIRLINGTON ROAD SUITE 401		7: 0.4	12 28 2016			
	City ARLINGTON	State VA	Zip Code 22206	Transaction ID : SA17.6074 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		2403.22 Memo Item LIST RENTAL INCOME			
	Name of Employer (for Individual)	Occ	upation (for Individual)				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 19655.08]			
С .	Full Name of Individual (Last, First, Middle Initi	al) or Full C	rganization Name	Date of Receipt			
	Mailing Address			M = M / D = D / Y = Y = Y			
	City	State	Zip Code	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C					
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼				
S	SUBTOTAL of Receipts This Page (optional)			8875.12			
Ι,	OTAL This Period (last page this line number o	nnly)		8875.12			

TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3X)			FOR LINE	PAGE 7 OF 9			
ITEMIZED DISBURSEMENTS		parate schedule(s) h category of the	(CILCUX OIII)	· — · —			
		d Summary Page	X 21b 28a	22 23 28b 28c	26 27 29 30b		
Any information copied from such Reports and St	atements may	, not he sold or us					
or for commercial purposes, other than using the							
NAME OF COMMITTEE (In Full)							
Right to Rise USA							
Full Name (Last, First, Middle Initial)							
A. CMDI				Date of Disburse	ement		
Mailing Address 4502 CDDING LIII L. DD				12 06 / Y Y Y Y Y			
Mailing Address 1593 SPRING HILL RD SUITE 400							
City	State	Zip Code		FEC Identificatio	n Number		
TYSONS CORNER Purpose of Disbursement	VA	22182					
DATABASE MANAGEMENT				C			
Candidate Name			Category/		ID: SB21B.I6065 Disbursement this Period		
			Type	7thount of Euch			
	rsement For:				1000.00		
Senate President	Other (sp	General					
State: District:	Other (sp	vecily) 🔻		Memo Item			
Full Name (Last, First, Middle Initial)							
B. AMERICAN EXPRESS				Date of Disburse	ement		
Mailing Address B.O. DOV 050440				1	2016		
Mailing Address P.O. BOX 650448				12 0	2016		
City	State	Zip Code		FEC Identificatio	n Number		
DALLAS Purpose of Disbursement	TX	75265					
CREDIT CARD PAYMENT				Transaction ID: SB21B.I6064 Amount of Each Disbursement this Period 325.98			
Candidate Name			Category/				
Office Cought			Type				
Office Sought: House Disbu	rsement For: Primary	General					
President	Other (sp			Memo Item			
State: District:				Memo item			
Full Name (Last, First, Middle Initial)				Date of Disburse	amont		
c. GOOGLE.COM							
Mailing Address 1600 AMPHITHEATRE PKWY				12 02 7 9 9 9 9			
City	State	Zip Code					
MOUNTAIN VIEW	CA	94043		FEC Identificatio	n Number		
Purpose of Disbursement SUBSCRIPTION - EMAIL							
Candidate Name					ID : SB21B.I6069		
Candidate Name			Category/ Type	Amount of Each Disbursement this Period 80.00			
Office Sought: House Disbu	rsement For:		> r -				
Senate	Primary	General					
State: President	Other (sp	pecify) \blacktriangledown		X Memo Item			
otate. District.							
SUBTOTAL of Disbursements This Page (option	al)				1325.98		
TOTAL This Period (last page this line number of	only)						

SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 8 OF				8 OF 9		
ITEMIZED DISBURSEMENTS		parate schedule(s) category of the	(check or	, <u> </u>			27		
		Summary Page	X 211		22 23 26				
[288		28c		30b		
Any information copied from such Reports and State or for commercial purposes, other than using the na									
NAME OF COMMITTEE (In Full)									
Right to Rise USA									
Full Name (Last, First, Middle Initial)				D	D: 1				
A. MAILCHIMP					Date of Disbursement 12 02 2016				
Mailing Address 675 PONCE DE LEON AVE NE				_					
SUITE 5000									
City	State	Zip Code		FEC Ide	ntification	n Number			
ATLANTA	GA	30308					\neg		
Purpose of Disbursement SUBSCRIPTION - EMAIL				C					
Candidate Name			0			ID : SB21B.I60	-		
			Category/ Type	Amount	Disbursement t	this Period			
Office Sought: House Disburse	ement For:	1		1 []	-		40.00		
Senate	Primary	General			7 7				
President	Other (sp	ecify) \blacktriangledown		★ Men	no Item				
State: District:									
Full Name (Last, First, Middle Initial) B. SLACK				Date of	Disburse	ment			
J. SLACK					M M / D D / Y Y Y Y				
Mailing Address 155 5TH STREET, 6TH FLOOR					12 02 2016				
City SAN FRANCISCO	State CA	Zip Code 94103		FEC Ide	ntification	n Number			
Purpose of Disbursement	L CA	Category/ Type ment For: Primary General Other (specify)			Transaction ID: SB21B.I6071 Amount of Each Disbursement this Period				
SUBSCRIPTION									
Candidate Name									
	7								
Senate President									
State: District:	oution (op-				X Memo Item				
Full Name (Last, First, Middle Initial)									
C. STRATEGIC SOLUTIONS				Date of	Disburse	ment			
					M M / D D / Y Y Y Y				
Mailing Address 3724 DUNBARTON DR.			12	08	9 201	16			
City	State	Zip Code		FFO Ide		Ni. mala a u			
MOUNTAIN BROOK	AL	35223		FEC Ide	nuncation	n Number	_		
Purpose of Disbursement COMPLIANCE CONSULTING									
Candidate Name						ID : SB21B.I60			
Candidate Name			Category/ Type	Amount	Amount of Each Disbursement this Period				
Office Sought: House Disburse	ement For:				5400.00				
Senate	Primary				7 7 7				
President	Other (sp	Other (specify) ▼			no Item				
State: District:									
						-	400.00		
SUBTOTAL of Disbursements This Page (optional)			······		7		100.00		
TOTAL This Period (last page this line number only	v)								

Disputs Dis	SCHEDULE B (FEC Form 3X)	, .		FOR LINE NUMBER: PAGE 9 OF 9					
Detailed Surmary Page	ITEMIZED DISBURSEMENTS			l '	(check only one)				
Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of seliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit committee. NAME OF COMMITTEE (in Full) Right to Rise USA Full Name (Last, First, Middle Initial) A. CMDI Mailing Address 1583 SPRING HILL RD SUITE 400 City TYSONS CORNER Purpose of Diabursement DATABASE MANACEMENT Candidate Name Category/ Tyte Prinsident State: District Full Name (Last, First, Middle Initial) B. Mailing Address City State: District Full Name (Last, First, Middle Initial) C. City Tysons of Diabursement Dother (specify) ▼ State: District Full Name (Last, First, Middle Initial) C. Full Name (Last, First, Middle Initial) C. State: District Full Name (Last, First, Middle Initial) C. State: District Full Name (Last, First, Middle Initial) C. State: District Full Name (Last, First, Middle Initial) C. State: District Full Name (Last, First, Middle Initial) C. State: District Full Name (Last, First, Middle Initial) C. State: District Full Name (Last, First, Middle Initial) C. State: District Full Name (Last, First, Middle Initial) C. State: District Full Name (Last, First, Middle Initial) C. State: District Full Name (Last, First, Middle Initial) C. State: District Full Name (Last, First, Middle Initial) C. State: District Full Name (Last, First, Middle Initial) Date of Diabursement this Period Typo T									
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Full Name (Last, First, Middle Initial)									
A. CMDI Mailing Address 1593 SPRING HILL RD SUITE 400 City TYSONS CORNER Purpose of Disbursement DATAGASE MANAGEMENT Candidate Name Office Sought:	Right to Rise USA								
Mailing Address 1593 SPRING HILL RD SUITE 400 City TYSONS CORNER TYSONS CORNER TYSONS CORNER Purpose of Disbursement Candidate Name City President State: District: Full Name (Last, First, Middle Initial) B. Mailing Address City State: Disbursement Candidate Name City Purpose of Disbursement Candidate Name City State: Disbursement Candidate Name City Purpose of Disbursement Candidate Name City State: Disbursement City State: Disbursement Candidate Name Category/ Amount of Each Disbursement this Period Memo Item Substate: Disbursement City Memo Item Substate: Disbursement This Page (optional)					5				
Mailing Address 1933 SPRING HILL RD SUITE 400 City TYSONS CORNER PUrpose of Disbursement DATABASE MANAGEMENT Candidate Name City State: District: Full Name (Last, First, Middle Initial) Candidate Name City State: District: Full Name (Last, First, Middle Initial) Candidate Name City State: District: Full Name (Last, First, Middle Initial) Candidate Name City State: District: Full Name (Last, First, Middle Initial) Candidate Name City State: District: Full Name (Last, First, Middle Initial) Candidate Name City State: District: Full Name (Last, First, Middle Initial) Candidate Name City State: District: Full Name (Last, First, Middle Initial) Candidate Name City State: District: Candidate Name Category: Amount of Each Disbursement this Period Mamo Item FEC Identification Number Category: Amount of Each Disbursement this Period Mamo Item FEC Identification Number Category: Amount of Each Disbursement this Period Category: Amount of Each Dis	A. CMDI								
City TYSONS CORNER Purpose of Disbursement DATABASE MANACEMENT Candidate Name Office Sought: House Senate Primary General Other (specify) ▼ Bull Name (Last, First, Middle Initial) Mailing Address City Sanate Primary General Other (specify) Senate Primary General Other (specify) Type Office Sought: House Disbursement Candidate Name Category/ Type Memo Item Date of Disbursement this Period FEC Identification Number Category/ Type Memo Item FEC Identification Number Category/ Type Date of Disbursement Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) FEC Identification Number Category/ Type FEC Identification Number Category/ Type Office Sought: President Disbursement For: Memory General Other (specify) Date of Disbursement this Period FEC Identification Number Category/ Type Disbursement For: Memory General Other (specify) Memory Item FEC Identification Number Category/ Type Date of Disbursement this Period FEC Identification Number Category/ Type Date of Disbursement In Period FEC Identification Number Category/ Type Memory Item	Mailing Address 1593 SPRING HILL RD								
TYSONS CORNER Purpose of Disbursement Candidate Name City Purpose of Disbursement Candidate Name Category/ Type District: Category/ Type District: Full Name (Last, First, Middle Initial) B. Mailing Address City Office Sought: House President Candidate Name Category/ Type Disbursement Candidate Name Category/ Type Disbursement Candidate Name Category/ Type Disbursement Category/ Type Disbursement Category/ Type Disbursement Category/ Type FEC Identification Number Category/ Type Disbursement Category/ Type Disbursement Category/ Type Testident Category/ Type Testident Category/ Type Testident Disbursement Category/ Type Testident Category/ Type Testident Category/ Type Testident Te	-								
Purpose of Disbursement DATABASE MANAGEMENT Candidate Name Office Sought:	•				FEC Ide	FEC Identification Number			
Category/ Office Sought: House	Purpose of Disbursement	• • • • • • • • • • • • • • • • • • • •	22102		C				
Caregory/ Type Office Sought: House State: District: House Primary General Primary General Primary General Primary General President State: District: District: District: House Senate President General Primary General General Primary General Gene						saction I	D : SB21	3.16066	
Office Sought:	Candidate Name								
Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) B. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Primary General Primary General Other (specify) Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Primary General Other (specify) Memo Item Date of Disbursement this Period Type Office Sought: House Disbursement For: State: Disbursement For: Senate Primary General Other (specify) Mailing Address City State Zip Code President Candidate Name Office Sought: House Senate Primary General President Candidate Name Office Sought: House Disbursement For: Senate President Other (specify) Memo Item State: District: Memo Item SubstortAL of Disbursements This Page (optional)	Office Sought: House Disburse	ement For:		Туре	- Г.			337.50	
State: District: Full Name (Last, First, Middle Initial) B. Mailing Address City			General						
B. Date of Disbursement		Other (sp	ecify) ▼		Mem	io Item			
Mailing Address City									
City Purpose of Disbursement Candidate Name Category/ Office Sought: House Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Memo Item FEC Identification Number Category/ Type Memo Item State: District: Memo Item State: Disbursement For: Senate Primary General Other (specify) ▼ Substate: District: Substate: District: Memo Item Substate: District: Memo Item Substate: District: Memo Item	B.				Date of	Disburser	nent		
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Purpose of Disbursement Candidate Name Office Sought: House Senate Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: Substrict: Memo Item FEC Identification Number Category/ Type Memo Item Substrict: Memo Item Substrict: Memo Item	City	State	Zip Code		FEC Ide	ntification	Number		
Candidate Name Category/ Type Office Sought:	Purpose of Dishursement					itilloation	Tumber		
Office Sought: House Senate Primary General Other (specify) State: District: Memo Item Date of Disbursement City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Office Sought: House Senate Primary General Other (specify) Office Sought: House Disbursement For: Senate Primary General Other (specify) Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: Memo Item FEC Identification Number Category/ Type Memo Item Suppose the State State State Senate Primary General Other (specify) Suppose the State	Fulpose of Disbursement				[C]				
Office Sought: House Senate Primary General Other (specify) State: District: Memo Item Date of Disbursement For: Mailing Address Disbursement For: Senate Primary General Other (specify) Date of Disbursement Date of Date o	Candidate Name		Type ment For: Primary General			Amount of Each Disbursement this Period			
Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code FEC Identification Number Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) Memo Item State: District: Subtrotal of Disbursements This Page (optional)									
State: District: Other (specify) Memo Item		7							
State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Primary General Other (specify) State: District: Substoctal of Disbursements This Page (optional)						Marina Harri			
City State Zip Code FEC Identification Number Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: M M M / D D / YYYYY FEC Identification Number Category/ Type Amount of Each Disbursement this Period Memo Item 337.50	State: District:					iviemo item			
City State Zip Code FEC Identification Number Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ Subtotal of Disbursements This Page (optional)					Data of I	Diahaa			
City State Zip Code FEC Identification Number Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ State: District: Substrict: Memo Item 337.50	C.								
Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President State: District: Substitute of Disbursements This Page (optional)	Mailing Address								
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